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PTO/SB/05 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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| | | | | | |
|---|---|---|---|---|----------------|
| UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53 (b))</i> | | Attorney Docket No.: 68.0399 | | | |
| | | First Named Inventor or Application Identifier: Charles E. Vise, Jr. | | | |
| | | Title: Multiple Zone Testing System | | | |
| | | Express Mail Label No.: EV 337 085 237 US | | | |
| APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i> | | ADDRESS TO: Mail Stop: Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | | | |
| <div><div><div>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and duplicate for fee processing)</i></div><div>2. <input checked="" type="checkbox"/> Specification [Total Pages: 19]<ul style="list-style-type: none">- Descriptive title of the Invention- Cross Reference to Related Applications- Statement Regarding Fed-sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Descriptions of the Drawings <i>(if filed)</i>- Detailed Description- Claim(s)- Abstract of the Disclosure</div><div>3. <input checked="" type="checkbox"/> Drawings (35 U.S.C. 113) [Total Sheets: 4]</div><div>4. Oath or Declaration [Total Pages: 4]<div>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</div><div>b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63 (d)) <i>(for continuation/divisional with Box 16 completed)</i><div>i <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</div></div></div></div><div><div>5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i></div><div>6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i><div>a. <input type="checkbox"/> Computer Readable Copy</div><div>b. <input type="checkbox"/> Paper Copy</div><div>c. <input type="checkbox"/> Statement verifying identity of above copies</div></div></div></div> | | | | | |
| ACCOMPANYING APPLICATION PARTS | | | | | |
| <div><div>7. <input checked="" type="checkbox"/> Assignment papers (cover sheet & document(s))</div><div>8. <input checked="" type="checkbox"/> 37 C.F.R. 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i></div><div>9. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></div><div>10. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS Statement (IDS)/Form 1449 Citations</div><div>11. <input type="checkbox"/> Preliminary Amendment</div><div>12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></div><div>13. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></div><div>14. <input type="checkbox"/> Nonpublication Request under 35 U.S.C.122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35</div><div>15. <input type="checkbox"/> Other: _____</div></div> | | | | | |
| 16. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____/_____ Prior application information: Examiner: _____ Group/Art Unit: _____ For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts. | | | | | |
| 17. CORRESPONDENCE ADDRESS | | | | | |
| <input type="checkbox"/> Customer Number or Bar Code Label | | (Insert customer No. or Attach bar code label here) | | or <input checked="" type="checkbox"/> Correspondence address below | |
| NAME | | Jeffrey E. Griffin Schlumberger Technology Corporation, Schlumberger Reservoir Completions | | | |
| ADDRESS | | 14910 Airline Road P.O. Box 1590 | | | |
| CITY | Rosharon | STATE | Texas | ZIP CODE | 77583-1590 |
| COUNTRY | U.S. | TELEPHONE | (281) 285-5720 | FAX | (281) 285-5537 |
| Name (Print/Type) | Jeffrey E. Griffin | | Registration No. (Attorney/Agent): 36,534 | | |
| Signature |  | | | Date: 10/14/03 | |

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

22154 U.S. PTO
10/684604



101403

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FEE TRANSMITTAL

For FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

\$810

Application Number**Filing Date****First Named Inventor**

Charles E. Vise, Jr.

Group Art Unit**Examiner Name****Attorney Docket Number**

68.0399

METHOD OF PAYMENT (Check all that apply)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account
Number
Deposit Account
Name

50-0457

Schlumberger Technology Corp.

- ☒ Charge Any Additional Fee Required
Under 37 CFR 1.16 and 1.17

2. ☐ Payment Enclosed:

☐ Check ☐ Money Order ☐ Other

FEE CALCULATION**1. BASIC FILING FEE**

| Large Entity Code | Large Entity Fee (\$) | Small Entity Code | Small Entity Fee (\$) | Fee Description | Fee Paid |
|-------------------|-----------------------|-------------------|-----------------------|------------------------|----------|
| 1001 | 770 | 201 | 385 | Utility filing fee | \$770 |
| 1002 | 310 | 206 | 155 | Design filing fee | |
| 1003 | 480 | 207 | 240 | Plant Filing fee | |
| 1004 | 760 | 208 | 380 | Reissue filing fee | |
| 1005 | 160 | 214 | 75 | Provisional filing fee | |

SUBTOTAL (1)

\$770

2. EXTRA CLAIMS

Total Claims

20

-20 =

0

Fee from below

\$ 18.00

Fee Paid

\$0

Independent Claims

3

-3 =

0

\$86.00

\$0

Multiple Dependent Claims

Large Entity Code

Large Entity Fee (\$)

Small Entity Code

Small Entity Fee (\$)

Fee Description

| Large Entity Code | Large Entity Fee (\$) | Small Entity Code | Small Entity Fee (\$) | Fee Description | Fee Paid |
|-------------------|-----------------------|-------------------|-----------------------|--|----------|
| 1202 | 18 | 2202 | 9 | Claims in excess of 20 | |
| 1201 | 86 | 2201 | 43 | Independent claims in excess of 3 | |
| 1203 | 290 | 2203 | 145 | Multiple dependent claims | |
| 1204 | 84 | 2204 | 39 | **Reissue independent claims over original patent | |
| 1205 | 18 | 2205 | 9 | **Reissue claim in excess of 20 and over original patent | |

SUBTOTAL(2)

\$0

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

| Large Entity Code | Large Entity Fee (\$) | Small Entity Code | Small Entity Fee (\$) | Fee Description | Fee Paid |
|-------------------|-----------------------|-------------------|-----------------------|--|----------|
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1840* | 113 | 1840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for response within first month | |
| 116 | 380 | 216 | 190 | Extension for response within second month | |
| 117 | 870 | 217 | 435 | Extension for response within third month | |
| 118 | 1,360 | 218 | 680 | Extension for response within fourth month | |
| 128 | 1,850 | 228 | 925 | Extension for response within fifth month | |
| 119 | 300 | 219 | 150 | Notice of Appeal | |
| 120 | 300 | 220 | 150 | Filing a brief in support of an appeal | |
| 121 | 260 | 221 | 130 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive unavoidably abandoned application | |
| 141 | 1,210 | 241 | 605 | Petition to revive unintentionally abandoned application | |
| 142 | 1,210 | 242 | 605 | Utility issue fee | |
| 143 | 430 | 243 | 215 | Design issue fee | |
| 144 | 580 | 244 | 290 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petition to Commissioner | |
| 123 | 50 | 123 | 50 | Petitions related to provisional applications | |
| 126 | 240 | 126 | 240 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 | Recording each patent assignment property (times number of properties) | \$40 |
| 146 | 760 | 246 | 380 | Filing a submission after final rejection (37 CFR 1.129(a)) | |
| 149 | 760 | 249 | 380 | For each additional invention to be examined (37 CFR 1.129(b)) | |

Other fee (specify)

Other fee (specify)

SUBTOTAL(3)

\$40

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

Typed or Printed Name

Jeffrey E. Griffin

Signature

Complete (if applicable)

Reg. Number

36,534

Deposit Account
User ID

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Charles E. Vise, Jr.

Attorney Docket No.: 68.0399

Serial No.:

Art Unit:

Filed:

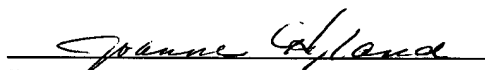
Examiner:

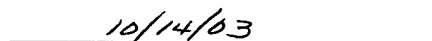
For: **Multiple Zone Testing System**

Mail Stop: Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

CERTIFICATE OF MAILING

I hereby certify that this Fee Calculation Sheet (in duplicate) is being deposited with the United States Postal Service as Express Mail No. EV 337 085 237 US in an envelope addressed to: Mail Stop: Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.


Joanne Hyland


Date

Joanne C. Hyland
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14910 Airline Road
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Attorney Docket No.: 68.0399

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Commissioner for Patents
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Joanne Hyland

10/14/03
Date

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Applicant: Charles E. Vise, Jr.

Attorney Docket No.: 68.0399

Serial No.:

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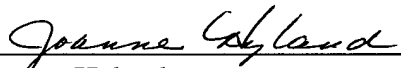
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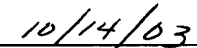
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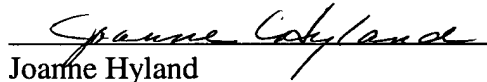
Examiner:

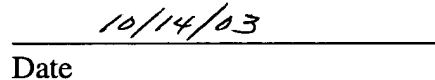
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Charles E. Vise, Jr.

Attorney Docket No.: 68.0399

Serial No.:

Art Unit:

Filed:

Examiner:

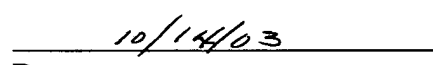
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Joanne Hyland


Date

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Applicant: Charles E. Vise, Jr.

Attorney Docket No.: 68.0399

Serial No.:

Art Unit:

Filed:

Examiner:

For: **Multiple Zone Testing System**

Mail Stop: Patent Application

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